NOTICE OF FORM CHANGE NO. 03-207				DATE 12/05/2003
To: County Welfare Director Supply Clerk / Forms Coordinator			FROM: Forms Management Unit (916) 657-1907	
☐ Community Care Licens ☐ Private and Public Adop	~		District Attorney Other	
Listed below is information re This notice updates your Dep				
FORM NUMBER AND TITLE EL 800 (3	3/79) Summary Report of	Uncollecte	ed Loans	
ORDER UNIT	☐ Free ☐ Sold	ESTIMATED PRICE		INITIAL SUPPLY SENT
☐ New ☐ Revised	DATE OF FORM 3/79	REPLACES		
REQUIRED FORM-	REQUIRED FORM-			
 □ No Change Permitted □ Substitute Permitted With Prior DSS Approval □ Recommended Form 				
UNLESS OTHERWISE SPECIFIED STO Department of Social Service P.O. Box 980788 West Sacramento, CA 9579	ces Warehouse		Other:	
	FORMS DISPOSITI	ON AND S	SPECIAL INSTRUCTIONS	
DISPOSITION OF OLD SUPPLY Use until exhausted		⊠ De	estroy	
use NEW FORM ☐ When supply available in DSS Warehouse			e new form effective	
USE FORM IN ACCORDANCE WITH				
All County Letter No.				
Other (specify)				
ADDITIONAL INFORMATION REGARDING FO	RM CHANGE			
This form is now obsolete.				